

Additional Clarification on Suicide Screenings

October 19, 2017

Certified Providers:

We have had some questions regarding the suicide screen that must be implemented, for the following chapters: 17, 18, 24, 27, and 65.

- Facilities will need to incorporate, into their screening process, a screen for whether the consumer is at risk to self or others, including suicide risk factors.

I would bring your attention to three components:

- 1) Screen for consumer at risk to self
- 2) Screen for consumer at risk for harming others
- 3) Screen contains suicide risk factors

These are the three components that Provider Certification will be looking at during our certification reviews.

Here are some suicide screens that you may utilize depending on which age population you are working with:

For children, age 6-12, the ASQ is appropriate. Below is a link to the website which has a printable version of the ASQ:

<https://www.nimh.nih.gov/news/science-news/ask-suicide-screening-questions-asq.shtml>

For youth, age 12-18, the PHQ 9 is appropriate. It can be found at the SAMHSA site below:

<https://www.samhsa.gov/suicide-prevention>

For adults, 18 and older, you may use the C-SSRS Risk Assessment. This is attached above. Also attached is the screener since last visit that can be performed if a consumer expresses suicidal risk at an earlier visit and you are wanting to see where he is during the current visit.

- 1) **C-SSRS Risk Assessment** can be used to determine if consumer is a risk to self and also contains suicide risk factors. It **DOES** ask about if the consumer is at risk of harming others. If utilized and filled out completely, this would be compliant.
- 2) The **screener since last visit** may be used by facilities to follow up on consumers, who have expressed suicidal risk, at previous visits. It, by itself, **DOES NOT** meet compliant standards for the above, since it does NOT inquire as to whether the consumer is a risk for harming others.

Questions:

- 1) **Do I have to use the screens sent out in the email?** Absolutely not! The below email states that those screens, as well as the ones attached, are screens that you MAY use. You MAY use those. You MAY use others. OR you MAY make up your own. Provider Certification is not mandating a specific screen since there is not a specific screen mandated by our standards. HOWEVER, if you have other divisions at ODMHSAS that require you to use a specific screen, or other entities that you contract with or that accredit you (such as CARF), then you must comply, not only with us but also with them.
- 2) **The PHQ 9 and the ASQ do not ask if a consumer is at risk of harming others.** That is correct and so if those screens are used, the provider will need to ask and document an additional question(s) regarding if a consumer is at risk of harming others. **We will not be putting forth samples of these types of questions.**

Remember there are three components that will be looked for during a certification review:

- Screen for consumer at risk to self
 - Screen for consumer at risk for harming others
 - Screen contains suicide risk factors
- 3) **I went to the link for the PHQ 9 but cannot find it.** The link for the PHQ 9 is found on the webpage given in the email below under the heading “Screening and Assessment Tools”
 - 4) **What level of provider staff can administer these screens?** According to the ODMHSAS Services Manual, the clinicians can be a CMII, a CADDC, or an LBHP or Licensure Candidate.

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